

# **Gender Sensitive Health Service Delivery**

## **March 2009**

## **A. Introduction**

Women's Centre for Health Matters Inc (WCHM) works to improve the health and wellbeing of women in the ACT and surrounding regions, with a focus on women who experience disadvantage. The WCHM Strategic Plan for 2008-12 identifies several key areas of focus, the first of which is Key Area 1 – Unmet Need. Key Area 1.1 recognises women's access to gender sensitive health practitioners as one such unmet need. Consequently, this brief has been developed for WCHM in accordance with the Strategic Plan in order to guide further work around gender sensitive health delivery.

## **B. What is gender?**

"Gender is the term used to refer to the socially constructed roles, responsibilities, identities and expectations assigned to men and women."<sup>1</sup> The variable concept of gender is commonly viewed in contrast to the biological and physiological elements of the sexes, which generally remain static. Given that gender is socially constructed, gender roles tend to change between cultures and over time.

Sex role stereotyping refers to the roles which are assigned, often rigidly, to individuals on the basis of gender. A classic example of sex role stereotyping is the idea of women being carers, and men being bread-winners.<sup>2</sup> The expectation associated with these roles can be deeply ingrained and extremely subtle. This can lead to friction between the sexes, different cultural groups, and also different generations as expectations of women and men change.

It is important that we understand gender, and that we are aware of the restrictions that gender roles can place on women. Furthermore, we must recognise the impact that gender can have on women's health and well-being.

Gender differences in our society can influence women's:

- Exposure to risk factors
- Access to and understanding of information about disease management, prevention and control;
- Subjective experience of illness and its social significance;
- Attitudes towards the maintenance of one's own health and that of other family members;
- Patterns of service use;
- Perceptions of quality of care.<sup>3</sup>

Gender can also influence the way in which health practitioners provide their services, how effective this is, and the degree to which they meet the needs of consumers. Therefore, the WCHM supports further development of gender sensitive practice in order to better meet the needs of women in the Australian Capital Territory (ACT).

## **C. What is gender sensitive practice?**

In order for health and well-being to be promoted effectively through policies and programs, a sound understanding of the principles of gender sensitive practice is necessary. "We live in a system that creates gender roles and stereotypes for women and men and it is necessary to address the disadvantages that arise from systemic discrimination."<sup>4</sup> Therefore, gender sensitive practice is necessary to respond to the differing needs of women and men.

According to the WCHM Strategic Plan for 2008-12, gender sensitive health practitioners are those who have qualifications in women's health and/or are trained to understand

and consider the impact of gender on health and well-being. These practitioners are also aware of the impact that culture may have on women's health and well-being.

#### **D. Gender Issues in Health**

While traditionally gender differences in health have been focused on reproductive issues, it is important to recognise that women's health concerns differ from those of men in many ways across the lifespan. Factors which may potentially impact on women's health more specifically include domestic violence, ageing and the increased prevalence of chronic and disabling diseases, women's frequent role as carers, mental health, occupational health and safety, issues around body image and self esteem, sexual abuse and low socio-economic status.<sup>5</sup>

These factors – and many others – are collectively known as social determinants of health.

Social inequalities negatively impact on the health and wellbeing of individuals and their communities. According to the social determinants of health, key factors that impact negatively on health and wellbeing include: housing; income and its distribution; food security; education and literacy; unemployment and employment security; early life development; Indigenous status; social safety nets; social exclusion; and access to quality health care services.<sup>6</sup>

It should be noted that the experience of each of these factors is gendered, and thus are the subsequent health concerns. The World Health Organisation recognises that health is more than the bio-medical; it is “a complete state of physical, mental and social wellbeing”.<sup>7</sup> Therefore, in order to appreciate and maintain good health, social and environmental aspects must be addressed in addition to biological and medical factors.<sup>8</sup>

#### **E. Principles of Gender Sensitive Practice**

The following principles have been adapted from the Women's Health Association of Victoria Position Paper on Gender and Practice:

- The social determinants of health should be the basis of health care services.
- Women and men are not the same! An enormous number of factors (such as age, race, ability, language, sexual orientation, education and access to resources) influence an individual's capacity to achieve optimal health and wellbeing. Gender is no different!
- Policies and programs should aim to achieve equality in health outcomes for women and men.
- Equity should be promoted, recognising that treating everyone equally will not produce the same outcomes. Rather, resources should be targeted at those who are most in need.
- Gender sensitive policy, program planning and practice are instrumental in achieving equitable outcomes for all. Equal health outcomes between women and men benefit society as a whole.
- In order to ensure inclusive and gender sensitive policy and procedures, consultation among the target group is vital.
- Women, particularly those who are marginalised and isolated, often lack economic equality with men of a similar background or status, and tend to be under-represented in

decision making processes. Measures should be taken to ensure that these women's voices are heard and responded to.

▪ **Appendix - endnotes**

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<sup>1</sup> Women's Health Association of Victoria, Position Paper on Gender and Practice, 2001, 4.

<sup>2</sup> Ibid.

<sup>3</sup> Ibid.

<sup>4</sup> Ibid.

<sup>5</sup> Ibid.

<sup>6</sup> Maslen, S., Social Determinants of Women's Health and Wellbeing in the Australian Capital Territory (Women's Centre for Health Matters: Canberra), 2008, 3.

<sup>7</sup> World Health Organisation, "Constitution of the World Health Organisation", (2006).

<sup>8</sup> Maslen, S., Social Determinants of Women's Health and Wellbeing in the Australian Capital Territory (Women's Centre for Health Matters: Canberra), 2008.